

AMENDMENTS TO THE CLAIMS

The following Listing of Claims replaces all prior versions, and listings, of claims.

LISTING OF CLAIMS

1. – 31. (Cancelled).

32. (Currently Amended) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering ~~an insulin analogue~~ to said critically ill patient or CIPNP patient a blood glucose regulator selected from the group consisting of insulin, an insulin analogue, an active derivative of insulin or an insulin analogue, or a physiologically acceptable salt of said derivative in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said ~~insulin analogue~~ blood glucose regulator is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more and wherein said treatment reduces the incidence of mortality in said patient.

33-92 (Cancelled)

93. (New) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering to said critically ill patient or CIPNP patient a blood glucose regulator selected from the group consisting of insulin, an insulin analogue, an active derivative of insulin or an insulin analogue, or a physiologically acceptable salt of said derivative in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said blood glucose regulator is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more and wherein said treatment reduces the incidence of critical illness polyneuropathy in said patient.

94 (New) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering to said critically ill patient or CIPNP patient a blood glucose regulator selected from the group consisting of insulin, an insulin analogue, an active derivative of insulin or an insulin analogue, or a physiologically acceptable salt of said derivative in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said blood glucose regulator is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more and wherein said treatment reduces the incidence of sepsis in said patient.

95 (New) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering to said critically ill patient or CIPNP patient a blood glucose regulator selected from the group consisting of insulin, an insulin analogue, an active derivative of insulin or an insulin analogue, or a physiologically acceptable salt of said derivative in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said blood glucose regulator is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more and wherein said treatment reduces the incidence of renal failure in said patient.

96 (New) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering to said critically ill patient or CIPNP patient a blood glucose regulator selected from the group consisting of insulin, an insulin analogue, an active derivative of insulin or an insulin analogue, or a physiologically acceptable salt of said derivative in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said blood glucose regulator is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more and wherein said treatment reduces the incidence of multiple organ failure in said patient.